COVID-19 Safety Plan Checklist
Clinical Settings

Facility/Site:		**Date:**	
Department(s):		**Department Cost Center:**	
Manager / Person Responsible			
Name/title of Assessment Participants			

To be completed by Department Manager/Supervisor in consultation with front line employees who perform the work and the Joint Occupational Health & Safety Committee or Worker Representative where there is no JOHSC.

Instructions

1. This checklist must be completed for any area that provides clinical or patient care services. This includes acute, ambulatory care, MHSU, long term care, etc.
2. This checklist can be completed at a site or department level based on the size, complexities and services of the site. This should be determined by site leadership.
3. Review the COVID-19 information page on PHC Connect for the most current information as well as the specific IPAC guidelines for your program.
   - Comprehensive PPE Recommendations – Acute
   - IPC Guidelines – Long Term Care
   - PHAC Guidelines for Acute Care
   - BCCDC Guidelines for Clinical Care

4. Review/have available as resource the PHC Biological Exposure Control Plan, COVID-19 Safety Plan Addendum and the COVID-19 Safety Plan Guidelines.
5. Complete the checklist and for each item indicate the corresponding compliance level: Yes, No, N/A.
   - Determine necessary actions for control and list in the '*required corrective actions*' column
   - Identify a person who is responsible for completing the required action – must be a specific person not a title
   - Mandatory elements are marked with a star symbol: (*)
6. Implement controls in a timely manner, monitor and update continually until all action items are complete.
7. Calculate compliance score and additional comments section.
   - Note: The compliance score is used to **inform discussion**. A compliance level of >80%, that meets all mandatory elements, signals that the Site/Department is ready to open
   - **Ultimately, this decision must made by the site leadership in conjunction with the Department's Manager**

8. Review outstanding issues/concerns and determine if the department is ready for the recovery phase.
   o If needed, consult with Infection Prevention and Control (IPAC) and/or Occupational Health & Safety (OHS) for further guidance
9. Once this checklist is complete, post in a location within the department that is easily accessible by employees, other workers and members of the public, and send a copy to:
   o ohs@providencehealth.bc.ca

All items below must be addressed as part of the COVID-19 Safety Plan. At any time a WorkSafeBC Officer or the Provincial Health Officer could come in and ask to review this plan and all supporting documentation

Risk Assessment Questions
Have you included front-line employees and JOHSC/Worker Reps in the completion of this assessment? ☐Yes ☐No Describe:
Have you identified areas where people gather, such as break rooms or meeting rooms?   ☐Yes ☐No Describe:
Have you identified the job tasks/processes where employees are close to one another or members of the public? ☐Yes ☐No Describe:
Have you identified tools, work stations and equipment that employees share while working? ☐Yes ☐No Describe:
Have you identified surfaces that people touch often, such as doorknobs, light switches, phones and elevator buttons?   ☐Yes ☐No Describe:

Element	Compliance			Required Corrective Actions (ONLY identify actions required to address **gaps**)	Person Responsible (must be a name)
	Yes	**No**	**N/A**		
Policies and Procedures					
1 The facility's capacity to accommodate patient flow is assessed on a regular basis.	☐	☐	☐		
2(*) Environmental service processes in place, identifying:	☐	☐	☐		
● Routine cleaning and disinfection procedures.	☐	☐	☐		
● Frequency of cleaning.	☐	☐	☐		
● List of clinical and non-clinical areas environmental services will clean and disinfect.	☐	☐	☐		
3 Linens and laundry: ● Reusable linen is laundered after each use ● Soiled linen is contained in leak-proof bags that are not over-filled.	☐	☐	☐		
4 The following recommendations for employees are in place, including:	☐	☐	☐		
● Using Staff & Medical Staff Screening Process as applicable	☐	☐	☐		
● Staying home when sick (mandatory) o EARL ~ 604-566-8266	☐	☐	☐		
● Staggering break times	☐	☐	☐		
● Not sharing food	☐	☐	☐		
● Maintaining 2m distance from other employees	☐	☐	☐		
5 Points of entry have controlled access in place to facilitate: 1. Screening at entrance to the facility as per the PHC Public Health and IPAC Recovery Principles (includes greeter scripts) 2. Providing masks if required 3. Patient flow (w/ physical distancing) 4. Hand hygiene reminders	☐	☐	☐		
6 Reception/Registration employees can maintain a 2m distance with clients/patients and each other ● If unable to physically distance have a physical barrier or wear Personal Protective Equipment (PPE).	☐	☐	☐		
7(*) Designated isolation/private room is available for direct placement of symptomatic/high-risk patients.	☐	☐	☐		

8 (*)	There is a process in place to take patients presenting with COVID-like symptoms to the designated examination/isolation room and/or waiting area.	☐	☐	☐		
9(*)	There is a process in place for terminal clean of symptomatic/high risk patient's exam/rooms upon discharge. Refer to PHC Cleaning and Disinfecting Guidelines.	☐	☐	☐		
10(*)	There is a process in place to provide masks to individuals that present with COVID-19-like symptoms.	☐	☐	☐		
11(*)	Personal protective equipment (PPE) is available for staff as outlined ● Comprehensive PPE Recommendations – Acute ● Guidance for Long-Term Care	☐	☐	☐		
12(*)	Alcohol-based hand rub (ABHR) is available at entrances and exits to/from clinical and non-clinical areas.	☐	☐	☐		
13(*)	Visual alerts (e.g., signs, posters) indicating hand hygiene, respiratory etiquette and physical distancing are posted throughout clinical and non-clinical areas.	☐	☐	☐		
14(*)	Clear physical distancing indicators are in place throughout clinical and non-clinical areas, i.e. elevators, waiting rooms, staff rooms, reception, triage, volunteer stations, etc.	☐	☐	☐		
15	Medical and non-medical equipment (e.g. clipboards, phones) are not accessible by patients/residents/visitors/families.	☐	☐	☐		
16(*)	Non-clinical areas (e.g., waiting area) have been de-cluttered removing non-essential items (remote control, magazines, toys, etc.).	☐	☐	☐		
17(*)	Examination and clinic rooms have minimal supplies and equipment.	☐	☐	☐		

Describe control measures in place to meet above requirements:
Examples: working remotely, changes to work schedules, occupancy limits, physical barriers, etc.

2) Employee Training & Education						
18	Employees have received education on appropriate use of personal protective equipment.	☐	☐	☐		
19(*)	Ensure employees have been trained on COVID-19 protocols and control measures: ● What to do if symptoms develop while at work ● Not working when sick ● Proper hand hygiene ● Respiratory etiquette ● Avoid touching the face ● Do not share food or uncleaned dishes or towels ● Physical distancing ● Pedestrian traffic flow within the workplace ● Additional procedures implemented by your team to maintain physical distancing, minimize time within 2 m of others, or reduce risk associated with sharing of tools, equipment or paper documents ● How to report health & safety concerns, including those related to COVID-19 ● Refusal of Unsafe Work	☐	☐	☐		
20	Employee training and education is documented.	☐	☐	☐		
21	Employees are aware of appropriate PPE, have been trained, and have access to PPE information, as well as appropriate donning and doffing procedures	☐	☐	☐		

	● PHC - PPE Guidelines				
22	Point-of-care Risk Assessment has been reviewed with employees providing direct patient care.	☐	☐	☐	
23	A plan has been developed and staff are aware of methods to ensure safety during group activities such as: ● Violence Prevention and Code White Response ● Clinical Learning ● Other types of training This includes physical distances, small class sizes, and PPE where required.	☐	☐	☐	

Describe measures currently in place to meet above requirements:

3) Routine practices

24	PPE supplies are available and accessible in appropriate sizes.	☐	☐	☐	
25	Alcohol based hand rub (ABHR) is located at point of care (clinical areas).	☐	☐	☐	
26	Single use, disposable equipment used if possible.	☐	☐	☐	
27	Containers that are used for decanting are cleaned, disinfected and dried in-between use.	☐	☐	☐	
28	Employee/team discussion has reviewed reducing or avoiding unnecessary travel between rooms/areas for assessment and/or treatment. Specifically the number of treatment bays used by an individual physician should be limited / designated per area.	☐	☐	☐	

4) Interaction, Equipment & Shared Spaces

29(*)	High touch points (e.g. side tables, side rails, chairs) in patient care area are cleaned and disinfected between clients.	☐	☐	☐	

30	Access to nursing stations is restricted	☐	☐	☐		
31(*)	Single-use covers (e.g., paper table covers) are discarded after each patient.	☐	☐	☐		
32(*)	A schedule is in place for cleaning and disinfecting identified surfaces/bins/shelves that are *not* routinely serviced by environmental services employees.	☐	☐	☐		
33(*)	Employee lounges/break rooms are de-cluttered and set up to accommodate physical distancing. Break and relax room information is readily available for staff.	☐	☐	☐		
34	Employee lounges and work spaces are equipped with disinfecting wipes for employees to clean and disinfect.	☐	☐	☐		
35	Personal products (e.g. creams, lotions) are not being shared between users.	☐	☐	☐		
36	Any medical/clinic equipment used (e.g. blood pressure cuffs, clipboard) should be cleaned and disinfected using the routine department practices for cleaning and disinfecting between patients.	☐	☐	☐		
37	ABHR are available at computer/phone stations.	☐	☐	☐		

Describe measures currently in place to meet above requirements:

4) Team Level Administration Considerations

38	Avoid non-essential business travel including travel between offices or work locations. Guidelines, health and wellness information for working at home, is available and has been reviewed with employees (if applicable).	☐	☐	☐		

39	Restrict travel between offices or work locations to critical business functions	☐	☐	☐		
40	If breaching the physical distancing requirement is unavoidable for a particular work task, plan the work task and provide instructions to workers to ensure that time spent in close proximity is minimized.	☐	☐	☐		
41	Ensure new products and processes are reviewed from a COVID-19 safety lens and align with policy & procedures.	☐	☐	☐		
42	Communication channels are in place to update all staff on changes in procedures or respond to concerns.	☐	☐	☐		

Describe measures currently in place to meet above requirements:

Checklist Results		
Total number of "Yes"		**Results:** _____ **Reminder: >80% pass and all mandatory elements met is required**
Total number of "No"		
Total number of items (Yes + No's, exclude N/A)		$\% \ of \ results = \dfrac{Total \ number \ of \ "Yes"}{Total \ number \ of \ Yes: and \ No"} \times 100$

Additional comments:

Decision for recovery:

This plan must be updated continuously until all identified corrective actions are implemented. Once all action items are complete check off the following:

☐ All identified action items have been implemented

By order of the Provincial Health Officer – this plan must be posted so it is visible for employees, other workers and members of the public.

Identify where this plan will be posted: _____

_____   _____
Front-line Employee Name   Signature

_____   _____
Supervisor Name   Signature

_____   _____
Manager Name   Signature